
Governance Committee

April 7, 2014

Chair: Gary Edwards

Present: Robert Rolfs, Jennifer Brown, Lloyd Berentzen, Lewis Garrett, Marc Babitz, Gary Edwards, David Patton, Dave Cunningham, Jerry Edwards, Angela Cristaudo.

Visitors: Heather Borski, Rebecca Giles, Brett McIlff, Dean Penovich, David Jackson, Kristina Russell

Minutes

1. Approve minutes from 3-17-14.
 - a. **Motion:** Jennifer Brown, **2nd:** Lewis Garrett

Vote Yes: Robert Rolfs, Jennifer Brown, Lewis Garrett, Marc Babitz, Gary Edwards, Dave Cunningham

Comprehensive Asthma Control through Evidence-Based Strategies and Public Health-Health Care Collaboration – Rebecca Giles

1. This grant was proposed at the previous Governance meeting on March 17, 2014.
2. Cameron previously sent out an email to all of the Local Health Departments to coordinate and designate representatives to meet with Rebecca and the asthma task force to see which departments were interested in applying.
3. Rebecca Giles met with the Local Health Departments and outlined a work plan. The requirement for the personnel is a minimum of two FTE's. The work plan and budget is proposed as having two FTE's: One FTE for a Project Coordinator (direct overall coordination, responsible for implementation of project activities, partnership coordination, development of materials, conducting meetings) , one FTE for a Program Epidemiologist (responsible for all data and surveillance activities, maintaining and enhancing state wide surveillance systems), .5 FTE of the required 2.5 is an Evaluation Specialist (responsible for measurement of all the performance measures and cross-state evaluation).
4. Proposing an additional .5 FTE for a Program Manager (responsible for budget), and another .25 FTE for an Office Technician, and .5 FTE for a Health Program Specialist which is currently vacant (responsible for additional policy projects, communication strategies, and other internal budget items).
5. With the remaining budget, which is \$200,000, 50% will go to the Local Health Department contracts and 50% to health system strategies. The health system budget for the first two years will go to development of a business case for providers to implement projects, as well as ongoing quality improvement projects as well to assist payers and providers.
6. Numerous activities will be conducted including working with Medicaid to identify the possibility of Community Health Worker payments through the Medicaid system.
7. Met with (8) out of the (12) Local Health Departments on April 4th, 2014. Bear River, Summit County, South East, and South West did not participate.
8. An RFP will need to be sent out to every Local Health Department once again to find out who would be interested in applying and participating. As of today four responded yes.
9. They must be able to identify a specific target population who has a disparate burden of asthma within that population.
10. The goal is to develop services and coordinate with other existing programs.

Motion to move to approve this grant: Marc Babitz, 2nd: Lewis Garrett.

Vote Yes: Robert Rolfs, Jennifer Brown, Lewis Garrett, Marc Babitz, Gary Edwards, Dave Cunningham

Health Impact Assessment for Improved Community Design – Brett McIlff

1. This grant was proposed at the previous Governance meeting on March 17, 2014 and approved as expedited; they were asked to come back and present financials.
2. Nationally there will be six awards for a three year funding cycle with a yearly average of \$145,000 per year.
3. Required activities are:
 - a. Conduct three health impact assessments per year.
 - b. Build a website and possibly use as an opportunity to engage, recruit, and partner, as well as provide information.
 - c. Build formal and informal partnerships.
 - d. Develop tools and resources by tracking pedestrian cycle crash/death data.
 - e. Evaluate of all the above.
4. Based on the above requirements the budget was set up as having a 1.5 FTE, as well as payroll, fringe, and required travel and trainings.
5. The proposal includes \$20,000 for Local Health Departments for Community Engagement for those three health impact assessments, and \$20,000 for website development.

Motion to approve the financials: Lewis Garrett, 2nd: Jennifer Brown.

Vote Yes: David Patton, Jennifer Brown, Lewis Garrett, Marc Babitz, Gary Edwards, Dave Cunningham

Public Health Emergency Preparedness/Hospital Preparedness – Dean Penovich

1. This is the 3rd year of a 5 year grant cycle.
2. The Hospital Preparedness Program took a 30% reduction; it went from 3.3 million to 1.9 million. This will reduce long-term care and hospital funding.
3. This year there a few changes and updates in the guidance.
 - a. One is with the Cities Readiness Initiative in which Summit County was eliminated. The funding will go to Salt Lake and Tooele County.
 - b. The second change is the specific guidance about the L&B laboratory requirements. They want to ensure the state lab meets the standard level.
 - c. Another change is they have one year to spend carryover funds.
 - d. The last change is S&S reviews; they are changing to a different tool that will measure operational readiness.
4. They are required to create new goals each year.

Motion to move to approve this grant: Dave Cunningham, 2nd: Marc Babitz.

Vote Yes: David Patton, Jennifer Brown, Lewis Garrett, Marc Babitz, Gary Edwards, Dave Cunningham

BioSense 2.0: Building State, Local, Tribal and Territorial Surveillance Capacity – David Jackson

1. This is the 3rd year of three year cycle.
2. Utah is one of sixteen states awarded money for the BioSense project.
3. There are two purposes of this grant; the first is to allow us to have the ability to obtain syndromics data to pick up on urgent diseases, and the other is the air quality and measures on health status of the community.
4. For the past two years have contracted with Salt Lake and Davis County Health Departments.
5. Expect level funding for this year which is \$174,000; were given the probability to expect the exact same amount as last year.
6. Have been able to gather information from different networks throughout the state, such as University Health Network and have been able to get data from multiple facilities.

Motion to move to approve this grant: Lewis Garrett, 2nd: Dave Cunningham.

Vote Yes: David Patton, Jennifer Brown, Lewis Garrett, Marc Babitz, Gary Edwards, Dave Cunningham

PPHF 2014 Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) – Kristina Russell

1. This is an ELC grant and is the 1st year of a 5 year funding cycle. This is a competitive continuation application.
2. Previously the ELC and ACA were on different cycles, now they are synchronized to one cycle.
3. The purpose of the ELC cooperative agreement is to build epidemiology, laboratory, and health information systems capacity in public health departments.
4. Estimated funding that is being requested is \$3,224,167. They are asking for the level funding from last year, and a little more in the HAI section.
5. On March 27th, 2014, UDOH discussed funding and grant activities related to the Local Health Departments with the Epidemiology Affiliate Group (EAG) Executive Committee.

Motion to move to approve this grant: Marc Babitz, 2nd: Jennifer Brown.

Vote Yes: David Patton, Jennifer Brown, Lewis Garrett, Marc Babitz, Gary Edwards, Dave Cunningham

Darin Dennis and Chris Furner – Update on Local Health Department/WIC Audit Discussion

Next Meeting – 04/21/2014 – 11:30am

Other Items and Agenda for April 21, 2014

1. Minority Health Grant review with Dulce.

Motion to adjourn:

Motions: David Patton 2nd: Jennifer Brown

Vote Yes: David Patton, Jennifer Brown, Lewis Garrett, Marc Babitz, Gary Edwards, Dave Cunningham